Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
District of New Jersey	
Case number (If known):	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	George-Anna	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Duin a consum nintona	Kelly	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Georgia	
	have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names and any assumed, trade names and	Kelly	
	doing business as names.	Last name	Last name
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - <u>5327</u>	xxx - xx -

Debtor 1	George-Anna	Kelly	Case number (if known)

First Name Middle Name Last Name

		About Debtor 1:			About Debtor 2 (S	Spouse Only in a	a Joint Case):
4.	Your Employer Identification Number	EIN			EIN		
	(EIN), if any.						
5.	Where you live				If Debtor 2 lives at	t a different add	lress:
		25 S Ladow Ave					
		Number Street			Number Street		
		Apt 4K					
		Millville	NJ 08332				
		City	State ZIP Code		City	State	ZIP Code
		CUMBERLAND-NJ					
		County			County		
		above, fill it in here. Note the any notices to you at this mail		iid	yours, fill it in here any notices to this		Court will Seria
		Number Street			Number Street		
		P.O. Box			P.O. Box		
		City	State ZIP Code		City	State	ZIP Code
6.	Why you are choosing this district to file for	Check one:			Check one:		
	bankruptcy	Over the last 180 days be I have lived in this district other district.				180 days before this district longer	filing this petition, er than in any
		I have another reason. E (See 28 U.S.C. § 1408.)	xplain.		I have another (See 28 U.S.C	reason. Explain C. § 1408.)	

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filling for Bankruptcy Code you are choosing to file under Chapter 1 Chapter 13 Livill pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashler's check, or money order. If your attorney is submitting your payment on your behalf, your attorney way pay with a redit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the Official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for bankruptcy within the last 8 years? Are any bankruptcy within the last 8 years? No. Yes. District When Case Number Relationship to you District When Case Number, if known District When Case Number, if known MM / DD / YYYYY No. No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Has your landlord obtained an eviction judgment Against You (Form 101A) and file it as pert of this bankruptcy petition.	Pa	art 2: Tell the Court Abo	out Your Bankruptcy Case)			
Under Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your atromey is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official powerly line that applies to your families to anylois and you in income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to anylois and your income is less than 150% of the official powerly line that applies to your families to with your petition. No. Yes. District When Relationship to you MM/DD/YYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment Against You (Form 101A) and file it as	7.						
Chapter 11 Chapter 12 Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you map pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverly line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? 10. Are any bankruptcy within the last 8 years? No. Yes. Debtor When Relationship to you Case Number Relationship to you or by a business partner, or by an affiliate? No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as		•	Chapter 7				
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? No. Yes. District When Case Number Relationship to you MM / DD / YYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against You (Form 101A) and file it as		under	·				
I will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? No. Yes. Debtor			Chapter 12				
local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filling Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filling for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments. If you choose this option, voy un must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? No. Yes. District When Case Number Case Number Case Number Case Number, if known District When Case Number, if known MM / DD / YYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as			Chapter 13				
Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as	8.	How you will pay the fee	local court for more de yourself, you may pay submitting your payme	etails about how you may pay. Ty with cash, cashier's check, or ment on your behalf, your attorney	pically, if you are paying the fee oney order. If your attorney is		
I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No. Yes. Debtor No. When Case Number Case Numb							
By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? No. Yes. Debtor			Application for Individu	uals to Pay The Filing Fee in Inst	tallments (Official Form 103A).		
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bankruptcy within the last 8 years? Yes. District When MM / DD / YYYY Case Number Case Number Relationship to you Case Number, if known District When MM / DD / YYYYY No. Gase Number, if known Case Number, if known MM / DD / YYYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as	9.	Have you filed for	No.				
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No. Go to line 12 Yes. Debtor District When MM/DD/YYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as		bankruptcy within the	Yes. District	When	Case Number		
cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No. Go to line 12 Yes. Debtor When Case Number, if known MM / DD / YYYYY No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as		last 8 years?		MM / DD / Y	YYY		
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not filing this case with you, or by a business partner, or by an affiliate? No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No. No. Go to line 12 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as			Yes. Debtor		Relationship to you		
partner, or by an affiliate? No. Go to line 12 residence? No. Go to line 12 Yes. Has your landlord obtained an eviction judgment against you? No No. Go to line 12 Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as			District	When	Case Number, if known		
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No No. Go to line 12 Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it as	11.		No. Go to line 12				
Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as	- • •	residence?	Yes. Has your landlord	obtained an eviction judgment agains	st you?		
Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as			No No. Go t	to line 12			
			Yes. Fill out I	nitial Statement About an Eviction Ju	dgment Against You (Form 101A) and file it as		

Debto	r 1 George-Anna		Kelly	Case number (if known)
	First Name Middle	Name	Last Name	
Par	t 3: Report About Any	Businesse	s You Own as a Sole Pi	roprietor
12.	Are you a sole proprietor	No.	Go to Part 4.	
(of any full- or part-time	Yes.	Name and location of busin	ess
	business?			
I	A sole proprietorship is a ousiness you operate as an		Name of business, if any	
	ndividual, and is not a separate legal entity such as			
6	a corporation, partnership, or		Number Street	
	LC.			
;	f you have more than one sole proprietorship, use a			
	separate sheet and attach it to this petition.		City	State ZIP Code
			Check the appropriate box	•
				(as defined in 11 U.S.C. § 101(27A)) ate (as defined in 11 U.S.C. § 101(51B))
			<u> </u>	d in 11 U.S.C. § 101(53A))
				defined in 11 U.S.C. § 101(6))
			None of the above	
i i	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor or a debtor as defined by 11 U.S.C.§	choosing to are a small most recent if any of the No. I	proceed under Subchapter business debtor or you are of t balance sheet, statement of use documents do not exist, if am not filing under Chapter am filing under Chapter 11, I	ourt must know whether you are a small business debtor or a debtor V so that it can set appropriate deadlines. If you indicate that you choosing to proceed under Subchapter V, you must attach your f operations, cash-flow statement, and federal income tax return or follow the procedure in 11 U.S.C. § 1116(1)(B).
l.	For a definition of <i>small</i> pusiness debtor, see 11 U.S.C. § 101(51D).	Yes. I		am a small business debtor according to the definition in the Bankruptcy
			•	proceed under Subchapter V of Chapter 11. am a debtor according to the definition § 1182(1) of the
				se to proceed under Subchapter V of Chapter 11.
Par	t 4: Report if You Own	or Have A	ny Hazardous Property	or Any Property That Needs Immediate Attention
	•			
	Do you own or have any property that poses or is	No.		
	alleged to pose a threat	Yes.	What is the hazard?	
	of imminent and dentifiable hazard to		If immediate attention is	
	oublic health or safety?		needed, why is it needed?	
	Or do you own any property that needs		Where is the property?	
	mmediate attention?			Number Street
	For example, do you own			
	perishable goods, or livestock that must be fed, or a building			
;	that needs urgent repairs?			City State ZIP Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes meincapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes meincapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 George-Anna Kelly Case number (if known)

First Name Middle Name Last Name

Part 6: Answ	V
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Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.

Yes. Go to line 17

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c

Yes. Go to line 17

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? No. I am not filing under Chapter 7. Go to line 18

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No

Yes

18.	How many creditors do
	you estimate that you
	04402

1-49	
50-99	
100-199	
200-999	

\$0-\$50,000

1,000-5,000
5,001-10,000
10,001-25,000

\$1,000,001-\$10 million

50,001-100,000 More than 100,000

25,001-50,000

19. How much do you estimate your assets to be worth?

\$50,001-\$100,000
\$100,001-\$500,000
\$500,001-\$1 million

\$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

20. How much do you estimate your liabilities to be?

\$0-\$50,000
\$50,001-\$100,000
\$100,001-\$500,000
\$500,001-\$1 million

\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million

\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

Part 7:

Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



Signature of Debtor 1



Signature of Debtor 2

Executed on 01/30/2023

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

For your attorney, if you are represented by one If you are not represented	I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of t available under each chapter for which the pe the notice required by 11 U.S.C. § 342(b) and	itle 11, United States Code, and erson is eligible. I also certify tha I, in a case in which § 707(b)(4)(have explained the relief t I have delivered to the debtor(s) D) applies, certify that I have no
by an attorney, you do not need to file this page.	knowledge after an inquiry that the information	n in the schedules filed with the	petition is incorrect.
	X	Date	
	Signature of Attorney for Debtor		MM / DD / YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	Bar number	State	
		2	

ebtor 1	1 George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

For you if you are filing this bankruptcy without an

D

If you are represented by an attorney, you do not need to file this page.

attorney

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

No

Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

No

Yes. Name of Person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

Χ		X	
Signature of	f Debtor 1	Signature of Debtor 2	
Date	01/30/2023 MM / DD / YYYY	Date MM / DD / YYYY	
Contact pho	ene <u>856-369-6194</u>	Contact phone	
Cell phone		Cell phone	
Email addre	ess nitara5544@icloud.com	Email address	

irst Name	Middle Name	Last Name	
irst Name	Middle Name	Last Name	
			rst Name Middle Name Last Name hkruptcy Court for the: District of New Jersey

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	hat I have read the summary and schedules filed with this declaration and
er penalty of perjury, I declare they are true and correct.	hat I have read the summary and schedules filed with this declaration and

Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your asse Value of w	ets vhat you own
	Property (Official Form 106A/B)		
1a. Copy line 5	55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 6	62, Total personal property, from Schedule A/B	\$	11937.00
1c. Copy line 6	3, Total of all property on <i>Schedule A/B</i>	\$	11937.00
Part 2: Sum	marize Your Liabilities		
		Your liab i Amount yo	
2. Schedule D: C	reditors Who Have Claims Secured by Property (Official Form 106D)		
2a. Copy the to	otal you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	8987.6
3. Schedule E/F:	Creditors Who Have Unsecured Claims (Official Form 106E/F)		
3a. Copy the to	otal claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	700.00
3b. Copy the to	otal claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	18445.3
	Your total liabilities	\$	28133.03
Part 3: Sum	marize Your Income and Expenses		
4. Schedule I: Yo	our Income (Official Form 106I)		
Copy your con	bined monthly income from line 12 of Schedule I	\$	1864.0
5. Schedule J: Yo	our Expenses (Official Form 106J)		
	nthly expenses from line 22c of <i>Schedule J</i>	\$	1977.00

Part 4:

Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 643.46

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	700.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	700.00

Fill in this in	formation to id	entify your case:		
Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name	
United States	Bankruptcy Court	for the: District of Nev	w Jersey	
Case number (If known)			_	

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:

			Onlyic-lannly home
treet address, if available, or other description			Duplex or multi-unit building
			Condominium or cooperative
			Manufactured or mobile home
			Land
City	State	ZIP Code	Investment property
			Timeshare
County			Other
			Who has an interest in the property? Check one

Creditors Who Have Claims Secured by Property.

Current value of the Current value of the entire property? portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

Part 2: **Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No

Yes

3.1 Make: Model Year: Approximate mileage: Other information:	Honda Civic 2013	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?	
			Check if this is community property (see instructions)	\$ 10550.00	\$ 8987.00
Exar	<i>mples:</i> Boats, trailers, mo	•	nd other recreational vehicles, other vehicles, and accordance of the contract		
Exar	<i>mples:</i> Boats, trailers, mo No Yes	•	vatercraft, fishing vessels, snowmobiles, motorcycle acces	sories	
Exar	<i>mples:</i> Boats, trailers, mo	•	watercraft, fishing vessels, snowmobiles, motorcycle acces Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured conthe amount of any security	laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property.
Exar	mples: Boats, trailers, mo No Yes Make:	•	vatercraft, fishing vessels, snowmobiles, motorcycle acces Who has an interest in the property? Check one.	Do not deduct secured c the amount of any secur Creditors Who Have Cla	

Case number (if known)

Kelly

Last Name

Middle Name

Debtor 1 George-Anna

First Name

ebtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 3: Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		·
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	No Yes. Describe household goods	\$ 500.00
	Yes. Describe Household goods	\$500.00
7.	Electronics	
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	No Yes. Describe electronics	\$ 1000.00
		φ 1000.00
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	No	1 🏚
	Yes. Describe	\$
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe	\$
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No	1 .
	Yes. Describe	\$
11	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	No	
	Yes. Describe clothes	\$ 100.00
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No	
	Yes. Describe jewelry	\$ 100.00
	1 Co. Describe	100.00
		1

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

13. Non-farm animals		
Examples: Dogs, cats, bi	rds. horses	
No		
Yes. Describe		\$
14. Any other personal and	I household items you did not already list, including any health aids you did not list	
Yes. Give specific information		\$
	all of your entries from Part 3, including any entries for pages you have attached mber here →	\$1700.00

ebtor 1	George-Anna	Kelly	Case number (if known)

First Name Middle Name Last Name

Part 4: Describe Your Financial Assets

Do	you own or have any le	gal or equitable interest ii	n any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	,	ave in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petition	
	No Yes		Cash:	\$50.00
17.	Deposits of money			
			counts; certificates of deposit; shares in credit unions, brokerage houses multiple accounts with the same institution, list each.	i,
	No			
	Yes		Institution name:	
		17.1 Checking account:	Fulton Bank	\$ 700.00
18.	Bonds, mutual funds, o Examples: Bond funds, i	•	rokerage firms, money market accounts	
	Yes	Institution or issuer name:		
19.	Non-publicly traded sto an LLC, partnership, an No Yes. Give specific information about them		% of ownership:	\$
20.	Negotiable instruments in	nclude personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
				\$
21.	Retirement or pension a Examples: Interests in IF		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	No			
	Yes. List each account separately.	Type of account:	Institution name:	
	, ,	Pension plan:	Pension With Employer	\$ 0.00

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

22.	Security deposits and pr	repayments			
			at you may continue service or use from a com blic utilities (electric, gas, water), telecommunio		
	No				
	Yes		Institution name or individual:		
		Security deposit on rental unit:	Cumberland Green		\$500.00
23.		a periodic payment of money	to you, either for life or for a number of years)		
	No				
	Yes	Issuer name and description:			
					\$
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 52		alified ABLE program, or under a qualified s	state tuition program.	
		Institution name and description	Separately file the records of any interests.11 U.S.C.	8 521(c):	
	100	motitution name and description.	departuely like the records of any interests. 11 0.0.0.	3 02 1(0).	Φ.
					\$
25.	Trusts, equitable or future exercisable for your ben		ner than anything listed in line 1), and rights	or powers	
	No				
	Yes. Give specific information about the	m			\$
26.	Patents, copyrights, trad	lemarks, trade secrets, and	other intellectual property		
			s from royalties and licensing agreements		
	, No		, ,		
	Yes. Give specific				\$
	information about the	m			
27.		d other general intangibles	rative association holdings, liquor licenses, prof	fessional licenses	
	No				
	Yes. Give specific				\$
	information about the	m			
Mo	oney or property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	ı			
	No				
	Yes. Give specific info	ormation		Federal:	\$
	about them, inclu	uding whether			Ψ
	you already filed and the tax years			State:	\$
	and the tax years			Local:	\$

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

29.	Family support		
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divo	orce settlement, property settle	ement
	No Yes. Give specific information		
	res. Give specific information	Alimony:	\$
		Maintenance:	\$
		Support	\$
		Divorce Settlement:	\$
		Property Settlement:	\$
30.	Other amounts someone owes you		
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation	on pay, workers' compensation	١,
	Social Security benefits; unpaid loans you made to someone else		
	No		
	Yes. Give specific information		\$
	<u> </u>		
31.	Interests in insurance policies		
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeow	ner's, or renter's insurance	
	No No Harris		
	Yes. Name the insurance company of each policy and list its value Company name:	neficiary:	
			\$
			·
32.	Any interest in property that is due you from someone who has died		
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are property because someone has died.	currently entitled to receive	
	No		
	Yes. Give specific information		\$
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand	l for payment	
	Examples: Accidents, employment disputes, insurance claims, or rights to sue		
	No		¢.
	Yes. Give specific information		\$
34.	Other contingent and unliquidated claims of every nature, including counterclaims of t to set off claims	he debtor and rights	
	No		Φ.
	Yes. Give specific information		\$
	<u> </u>		
35.	Any financial assets you did not already list		
	No		•
	Yes. Give specific information		\$
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages y		
	for Part 4. Write that number here	→	\$1250.00

ebtor 1	George-Anna		Kelly	Case number (if known)		
	First Name	Middle Name	Last Name			

Pa	Describe Any Business-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	
	No	
	Yes. Describe	\$
39.	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic dev	rices
	No	
	Yes. Describe	\$
40	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
40.	No	
	No Yes. Describe	\$
	res. Describe	
41.	Inventory	
	No Voe Benerike	\$
	Yes. Describe	\$
42	Interests in partnerships or joint ventures	
	No	
	Yes. Describe Name of entity: % of ownership:	
	0 %	\$
43.	Customer lists, mailing lists, or other compilations	
	No	
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	No	
	Yes. Describe	\$
44.	Any business-related property you did not already list	
	No	
	Yes. Give specific	
	information	
		\$
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$ 0.00
	7	Ψ

Debtor 1	George-Anna		Kelly	Case number (if known)		
	First Name	Middle Name	Last Name			

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
No. Go to Part 7.	
Yes. Go to line 47.	
	Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals	
Examples: Livestock, poultry, farm-raised fish	
No	
Yes	\$
48. Crops—either growing or harvested	
No	
Yes. Give specific information	\$
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
No	
Yes	\$
50. Farm and fishing supplies, chemicals, and feed	
No	\$
Yes	
51. Any farm- and commercial fishing-related property you did not already list	
No	
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	. [.
for Part 6. Write that number here	→ [\$

ebtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 8987.00 57. Part 3: Total personal and household items, line 15 \$ 1700.00 58. Part 4: Total financial assets, line 36 \$ 1250.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 +\$ 0.00 62. Total personal property. Add lines 56 through 61. 11937.00 Copy personal property total -> 11937.00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 11937.00

Fill in this inf	ormation to ide	entify your case:		
Debtor 1	George-Anna		Kelly	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
(opouse, ii iiiiig)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court t	or the: District of Ne	w Jersey	
Case number (If known)			_	

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exen	Part 1:	Identify	the Pro	perty You	Claim as	Exemp
---	---------	----------	---------	-----------	----------	-------

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B: Brief description: Line from Schedule A/B: Brief electronics electronics description: Line from Schedule A/B: Brief electronics Schedule A/B: Eline from Schedule A/B: Signature for the property and line of the property and line of the property out of the property on the property of the pro	Р	art 1: Iden	itify the Property You Clai	m as Exei	mpt						
You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Brief household goods \$ 500.00 \$ 500.00 \$ 522 (d)(5) Brief 2013 Honda Civic description: Line from Schedule A/B: 3.1 Brief electronics electronics \$ 1000.00 \$ 100% of fair market value, up to any applicable statutory limit Brief electronics \$ 1000.00 \$ 100% of fair market value, up to any applicable statutory limit Brief clothes \$ 1000.00 \$ 100% of fair market value, up to any applicable statutory limit Eline from Schedule A/B: 7 1000.00 522 (d)(5)	1.										
Brief description of the property and line on Schedule A/B that lists this property Copy the value from Schedule A/B Brief household goods schedule A/B Eline from Schedule A/B: 6 Brief 2013 Honda Civic description: Line from Schedule A/B: 3.1 Brief electronics schedule A/B: 3.1 Brief clothes description: Line from Schedule A/B: 3.1 Brief description: Line from Schedule A/B: 3.1 Brief description: Line from Schedule A/B: 3.1 Brief clothes schedule A/B: 3.100.00 Eline from Schedule A/B: 3.100.00 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Brief clothes schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline from Schedule A/B: 7 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline from Schedule A/B: 7 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline from Schedule A/B: 3.1000.00 Eline from Schedule A/B: 7 Eline fro											
Schedule A/B that lists this property Copy the value from Schedule A/B Brief household goods \$ 500.00 \$ 500.00 \$ 522 (d)(5) Line from Schedule A/B: 6 Brief 2013 Honda Civic \$ 8987.00 \$ 1612.32 \$ 522 (d)(2) Eline from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000 fair market value, up to any applicable statutory limit Brief electronics \$ 1000.00 \$ 1000.00 \$ 522 (d)(5) Brief clothes \$ 1000.00 \$ 1000 fair market value, up to any applicable statutory limit Brief clothes \$ 1000.00 \$ 1000 fair market value, up to any applicable statutory limit Brief clothes \$ 1000.00 \$ 1000 fair market value, up to any applicable statutory limit Brief clothes \$ 100.00 \$ 1000 fair market value, up to any applicable statutory limit	2.	For any prope	erty you list on <i>Schedule A/B</i> th	nat you clai	m as exem _l	ot, fill in the i	nformation below.				
Brief household goods \$ 500.00 \$ 500.00 522 (d)(5) Line from Schedule A/B: 6 Brief 2013 Honda Civic \$ 8987.00 \$ 1612.32 522 (d)(2) Line from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000.00 522 (d)(5) Brief clothes \$ 1000.00 \$ 1000.00 522 (d)(5)						Amount of the	ne exemption you claim	Specific laws that allow exemption			
description: Line from Schedule A/B: 6 Brief 2013 Honda Civic \$ 8987.00 \$ 1612.32 522 (d)(2) Line from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000.00 522 (d)(5) Line from Schedule A/B: 7 Brief clothes \$ 100.00 \$ 100.00 522 (d)(5)						Check only one box for each exemption.					
Line from Schedule A/B: 6 Brief 2013 Honda Civic \$ 8987.00 \$ 1612.32 522 (d)(2) Line from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000.00 522 (d)(5) Line from Schedule A/B: 7 Brief clothes \$ 100.00 \$ 100.00 522 (d)(5) Brief clothes \$ 100.00 \$ 1000.00 522 (d)(5)			household goods	\$	500.00	* ——		522 (d)(5)			
description: Line from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000.00 \$ 522 (d)(5) Line from Schedule A/B: 7 Brief clothes \$ 100.00 \$ 100.00 \$ 522 (d)(5) Brief clothes \$ 100.00 \$ 100.00 \$ 522 (d)(5) Brief clothes \$ 100.00 \$ 100.00 \$ 522 (d)(5)	-		6				· •				
Line from Schedule A/B: 3.1 Brief electronics \$ 1000.00 \$ 1000.00 522 (d)(5) Line from Schedule A/B: 7 Brief clothes \$ 100.00 \$ 100.00 522 (d)(5) Brief clothes \$ 100.00 \$ 100.00 522 (d)(5) Brief applicable statutory limit			2013 Honda Civic	\$	8987.00	· —		522 (d)(2)			
description: Line from Schedule A/B: 7 Brief clothes description: Line from Schedule A/B: 7 Brief clothes description: Line from Line from Substitution: Line from Substitution: Line from Substitution: Any applicable statutory limit Substitution: 1000.00 \$ 100			3.1				· •				
Line from Schedule A/B: 7 Brief clothes			electronics	\$	1000.00	· —		522 (d)(5)			
description: 100.00			7				· •				
Line from 100% of fair market value, up to any applicable statutory limit			clothes	\$	100.00	\$	100.00	522 (d)(5)			
		Line from	11				, I				

Debtor 1 George-Anna Kelly Case number (if known)

First Name Middle Name Last Name

Ρ	art 2: Addi	tional Page					
	• • •			ue of the u own?	Amount of the exemption you claim		Specific laws that allow exemption
			Copy the va		Check only one box for each exemption.		
	Brief description:	jewelry	\$	100.00	\$	100.00 fair market value, up to	522 (d)(5)
	Line from Schedule A/B:	12				icable statutory limit	
	Brief description:	Cash on Hand	\$	50.00	\$	50.00	522 (d)(5)
	Line from Schedule A/B:	16				fair market value, up to icable statutory limit	
	Brief description:	Pension plan Pension With Employer	\$	0.00		fair regulatively and to	522 (d)(5)
	Line from Schedule A/B:	21.1			100% of fair market value, up to any applicable statutory limit		
	Brief description:	Security deposit on rental unit Cumberland Green	\$	500.00	\$	500.00	522 (d)(5)
	Line from Schedule A/B:	22.1			100% of fair market value, up to any applicable statutory limit		
	Brief description:	Checking Account Fulton Bank	\$	700.00	\$	700.00	522 (d)(5)
	Line from Schedule A/B:	17.1			100% of fair market value, up to any applicable statutory limit		
3.		ing a homestead exemption oustment on 4/01/25 and every 3				fter the date of adjustmen	t.)
	No						
	Yes. Did yo	ou acquire the property covered	by the exem	ption within	1,215 days be	efore you filed this case?	
	No						
	Yes						

Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part	1: List All Secur	ed Claims					
for	each claim. If more thar	one creditor has a	e than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. etical order according to the creditor's name.			Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Wells Fargo Auto Creditor's Name PO Box 17900 Number Street		Describe the property that secures the claim: 2013 Honda Civic - 87,000 miles	\$	8987.68	\$10600.00	\$1612.32
	Denver CO 80217-0900 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Date debt was incurred		As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	'			
			Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit				
			Other (including a right to offset) Last 4 digits of account number				
			Column A dollar value totals from all pages.	\$	8987.68		

	First Name	Middle Name	Last Name					
Part 2	List Others t	o Be Notified for	a Debt That You Already Listed					
agency you hav	Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.							
	Name		On which line in Part 1 did you enter the creditor?					
			Last 4 digits of account number					

ZIP Code

Case number (if known)

Kelly

State

Debtor 1 George-Anna

City

Fill in this information to identify your case:						
Debtor 1	George-Anna		Kelly			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)						
	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of New Jersey						
Case number (If known)						

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

I	Part 1: List All of Y	our PRI	ORITY Unsec	cured Claims				
1.	Do any creditors have No. Go to Part 2. Yes.	priority (unsecured clain	ns against you?				
2.	each claim listed, identi nonpriority amounts. As unsecured claims, fill or	ify what ty s much as ut the Cor	rpe of claim it is. s possible, list the ntinuation Page o	creditor has more than one priority unsecured claim, list If a claim has both priority and nonpriority amounts, list e claims in alphabetical order according to the creditor's of Part 1. If more than one creditor holds a particular class instructions for this form in the instruction booklet.)	that nan	claim here ne. If you ha	and show bo	oth priority and in two priority
					To	otal claim	Priority amount	Nonpriority amount
2.1	State of NJ - Unem	ployment		Last 4 digits of account number	\$_	700.00	\$	\$
	PO Box 058			When was the debt incurred?				
	Number Street			As of the date you file, the claim is: Check all that apply				
	Trenton	NJ	08625	Contingent				
	City	State	ZIP Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		one.	Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were				
			nd another	intoxicated				
	Check if this clai	m is for a	community debt	Other. Specify				
	Is the claim subject t No Yes	o offset?						

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part	List ALL of Your NON	PRIORITY	Unsecured C	Claims					
3. Do	any creditors have nonpriority	unsecured	claims against	you?					
	No. You have nothing to report in Yes	n this part. S	ubmit this form t	o the court with your other schedules.					
no inc	npriority unsecured claim, list the	creditor sepa	arately for each o	ical order of the creditor who holds each claim. If a creditor has m claim. For each claim listed, identify what type of claim it is. Do not list im, list the other creditors in Part 3.If you have more than three nonpr	t claiı	ms already			
					Т	otal claim			
4.1	Atlantic City Electric Nonpriority Creditor's Name PO Box 597 Number Street Mays Landing NJ 08330			Last 4 digits of account number	\$	18445.35			
				When was the debt incurred? 01/01/2018					
				As of the date you file, the claim is: Check all that apply					
	City	State	ZIP Code	Contingent					
	Who incurred the debt? Check one	١.		Unliquidated					
	Debtor 1 only			Disputed					
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:					
				,					
	At least one of the debtors and a	another		Student loans					
	Check if this claim is for a co	ommunity de	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts					

Other. Specify

No Yes

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 3:	List Others to Be Notified	About a Debt	That You	Already Listed	
example 2, then l	e, if a collection agency is tryinglist the collection agency here.	g to collect from Similarly, if you	you for a de have more t	ebt you owe to some han one creditor for	that you already listed in Parts 1 or 2. For eone else, list the original creditor in Parts 1 or r any of the debts that you listed in Parts 1 or 2, list the lebts in Parts 1 or 2, do not fill out or submit this page.
	ood Franklin & Sampolo, P.A.		On which	entry in Part 1 or F	Part 2 did you list the original creditor?
Name 1201 Ne	ew Road , Suite 230		Line <u>4.1</u>	_ of (<i>Check one)</i> :	Part 1: Creditors with Priority Unsecured Claims
Linwood	NJ NJ	08221	- Last 4 die	gits of account num	Part 2: Creditors with Nonpriority Unsecured Claims
City	State	ZIP Code	- = = = = = = = = = = = = = = = = = = =	jilo ol account num	

18445.35

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6j. Total. Add lines 6f through 6i.

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a. D	Oomestic support obligations	6a.	\$
		axes and certain other debts you owe the lovernment	6b.	\$
		Claims for death or personal injury while you were ntoxicated	6c.	\$0.00
		Other. Add all other priority unsecured claims. Vrite that amount here.	6d.	+ \$0.00
	6e. T	otal. Add lines 6a through 6d.	6e.	\$
				Total claim
Total claims from Part 2	6f. S	Student loans	6f.	\$ 0.00
	0	Obligations arising out of a separation agreement or divorce that you did not report as priority laims	6g.	\$
		Debts to pension or profit-sharing plans, and other imilar debts	6h.	\$0.00
		Other. Add all other nonpriority unsecured claims. Vrite that amount here.	6i.	+ \$18445.35

Debtor 1	George-Anna		Kelly		
	First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)					
	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: District of New Jersey					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with w	hom you have the contra	ct or lease	State what the contract or lease is for
Cumberland Green Apartme Name 27 N Ladow Avenue Number Street	ents		Residential lease
Millville City	NJ State	08332 ZIP Code	- -

Fill in this information to identify your case:						
Debtor 1	George-Anna		Kelly			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)						
	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: District of New Jersey						
Case number (If known)			_			

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

your i	name and case number (if know	n). Answer every question.	, ridditional i ago to	runo pago: on the top or any rualitional rugos, into
1.	Do you have any codebtors? (If you are filing a joint case, do n	ot list either spouse a	as a codebtor.)
	No			
	Yes			
2.	Within the last 8 years, have years, California, Idaho, Louisi			? (Community property states and territories include nington, and Wisconsin.)
	No. Go to line 3.			
	Yes. Did your spouse, forme	er spouse, or legal equivalent live	with you at the time	?
	No			
	Yes. In which commun	ity state or territory did you live?		. Fill in the name and current address of that person.
	Name of your spouse, for	mer spouse, or legal equivalent		_
	Number Street			_
				_
	City	State	ZIP Code	_
3.	shown in line 2 again as a cod	ebtor only if that person is a g 0), <i>Schedule E/F</i> (Official Form	uarantor or cosigne	or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on e G (Official Form 106G). Use <i>Schedule D</i> ,
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1	Benjamin Galle			_ Schedule D, line 2.1
	Name			Schedule E/F, line
	25 S. Ladow Avenue Number Street			_
				Schedule G, line 2.1
	Apt 4-k			_
	Millville	NJ	08332	_
	City	State	ZIP Code	

Fill in this in	formation to ide	entify your case:		
Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	1			An amended filing
(Opodoo, ii iiiiiig	First Name	Middle Name	Last Name	A supplement showing postpetition chapter 13
United States	Bankruptcy Court f	for the: District of Nev	w Jersey	income as of the following date:
Case number (If known)			_	MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Describe Employment** 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, attach a separate page with **Employment Status Employed** Employed information about additional Not employed Not employed employers. Include part-time, seasonal, or self-employed work. Occupation may Include student or homemaker, if it applies Occupation Employer's name **Employer's address** Number Street Number Street City State Zip Code City State Zip Code How long employed there?

First Name Middle Name Last Name

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form

	belo	ow. If you need more space, attach a separate sheet to this form.			
				For Debtor 1	For Debtor 2 or non-filing spouse
2.		monthly gross wages, salary, and commissions (before all payroll	2	¢	Φ
	aed	uctions). If not paid monthly, calculate what the monthly wage would be.	2.	\$	\$
3.	Esti	mate and list monthly overtime pay.	3.	+\$	+\$
4.	Cal	culate gross income. Add line 2 + line 3.	4.	\$	\$
	Can	y line 4 here →	4	Φ.	
	Cop	y line 4 here →	4.	\$	\$
5.	List	all payroll deductions:			
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	\$
	5b.	Mandatory contributions for retirement plans	5b.	\$	\$
	5c.	Voluntary contributions for retirement plans	5c.	\$	\$
	5d.	Required repayments of retirement fund loans	5d.	\$	\$
	5e.	Insurance	5e.	\$	\$
	5f.	Domestic support obligations	5f.	\$	\$
	5g.	Union dues	5g.	\$	\$
	5h.	Other deductions. Specify:	5h.	+ \$	+ \$
			5h.	+ \$	+ \$
6.	Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$
Q	l iet	all other income regularly received:			
υ.		Net income from rental property and from operating business,			
	oa.	profession, or farm			
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0	Φ.	•
	01	monthly net income.	8a.	\$	\$
İ		Interest and dividends	8b.	\$	\$
	oc.	Family support payment that you, a non-filing spouse, or a dependent regularly receive			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$
	8d.	Unemployment compensation	8d.	\$	\$
		• •			·

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

For Debtor 1 For Debtor 2 or non-filing spouse 8e. Social Security 8e. 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Temp. Disability 8f. 1864.00 8f. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. + \$ 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. 1864.00 10. Calculate monthly income. Add line 7 + line 9. 1864.00 1864.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. 1864.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain: Returning to full time employment on 2/6/23

Fill in this in	formation to id	lentify your case:			
Debtor 1	George-Anna		Kelly	Check if this is:	
	First Name	Middle Name	Last Name	An amended filing	
Debtor 2 (Spouse, if filing))			A supplement showing postpetition chap	ter 13
(-1, 3,	First Name	Middle Name	Last Name	income as of the following date:	
United States Bankruptcy Court for the: District of New Jersey					
Case number (If known)			_	MM / DD / YYYY	

Official Form 106J							
Schedule J: Your	Expenses				12/15		
Be as complete and accurate as possible information. If more space is needed, atta (if known). Answer every question.							
Part 1: Describe Your Househo	old						
1. Is this a joint case?							
No. Go to line 2.							
Yes. Does Debtor 2 live in a sepa	arate household?						
No							
Yes. Debtor 2 must file O	fficial Form 106J-2, Expenses for	Separate Household of Debtor	2.				
2. Do you have dependents?	No No	Dependent's relationship to Debtor 1 or Debtor 2	Depende age	nt's	Does dependent live with you?		
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent				No		
Do not state the dependents' names.		Son	0		Yes		
3. Do your expenses include expenses of people other than yourself and your dependents?	No Yes						
Part 2: Estimate Your Ongoing Monthly Expenses							
Estimate your expenses as of your banks expenses as of a date after the bankrupt applicable date.							
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) Your expenses							
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.				\$	600.00		
If not included in line 4:							
4a. Real estate taxes			4a.	\$			
4b. Property, homeowner's, or renter's insurance							
4c. Home maintenance, repair, and upkeep expenses							
4d. Homeowner's association or condominium dues				\$			
5. Additional mortgage payments for your residence, such as home equity loans				\$			
6. Utilities:							
6a. Electricity, heat, natural gas			6a.	\$	200.00		

First Name Middle Name Last Name

			Your ex	penses
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	175.00
	6d. Other Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	70.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	50.00
	15c. Vehicle insurance	15c.	\$	100.00
	15d. Other. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	232.00
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I</i> , Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00

		Your expenses
	20d. Maintenance, repair, and upkeep expenses 20d.	\$ 0.00
	20e. Homeowner's association or condominium dues 20e.	\$0.00
21	Other. Specify: 21.	+\$
22	Calculate your monthly expenses.	
	22a. Add lines 4 through 21.	\$ 1977.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b.	\$
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 1977.00
23	Calculate your monthly net income.	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	\$ 1864.00
	23b. Copy your monthly expenses from line 22c above.	- \$ 1977.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c.	\$
24	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
	No.	
	Yes. Explain here: Returning to full time employment on 2/6/2023	

Fill in this information to identify your case:									
Debtor 1	George-Anna		Kelly						
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse, if filing)									
	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court	for the: District of Nev	v Jersey						
Case number (If known)			_						

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse.
- The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
- 3. The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

Column A Column B

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1:

Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						ebto		Debtor 2 or non-filing spou	se
2.	Your gross wages, salary, tips, bonuses, overtime, are (before all payroll deductions).	nd co	mmissio	ns	5	\$	643.46	\$	
3.	Alimony and maintenance payments. Do not include portion of the column B is filled in.	ayme	ents from a	spouse if	5	\$	0.00	\$	
4.	All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, and roommates. Include regular contributions from a spot filled in. Do not include payments you listed on line 3.	nclud your	e regular dependen	contributions ts, parents,	\$	£	0.00	\$	
5.	Net income from operating a business, profession, or farm	Deb	tor 1	Debtor 2					
	Gross receipts (before all deductions)	\$_	0.00	\$					
	Ordinary and necessary operating expenses	-\$_	0.00	-\$					
	Net monthly income from a business, profession, or farm	\$_	0.00	\$	Copy here	\$	0.00	\$	
6.	Net income from rental and other real property	Deb	tor 1	Debtor 2					
	Gross receipts (before all deductions)	\$_	0.00	\$					
	Ordinary and necessary operating expenses	- \$_	0.00	- \$					
	Net monthly income from rental or other real property	\$_	0.00	\$	Copy here	\$	0.00	\$	

Debtor 1	George-Anna		Kelly	Case number (if known)
	First Name	Middle Name	Last Name	

			Colui Debte			mn B or 2 or iling spous	se	
7.	Interest, dividends, and royalties		\$	0.00	\$			
8.	Unemployment compensation		\$	0.00	\$			
	Do not enter the amount if you contend that the amount reunder the Social Security Act. Instead, list it here:							
	For you	\$0.00						
	For your spouse	\$						
9.	Pension or retirement income. Do not include any amoubenefit under the Social Security Act. Also, except as stat not include any compensation, pension, pay, annuity, or a United States Government in connection with a disability, disability, or death of a member of the uniformed services retired pay paid under chapter 61 of title 10, then include that it does not exceed the amount of retired pay to which entitled if retired under any provision of title 10 other than	ed in the next sentence, do llowance paid by the combat-related injury or . If you received any that pay only to the extent you would otherwise be	\$	0.00	\$			
10.	Income from all other sources not listed above. Specif Do not include any benefits received under the Social Sec a victim of a war crime, a crime against humanity, or interreterrorism; or compensation, pension, pay, annuity, or allow States Government in connection with a disability, comba death of a member of the uniformed services. If necessary separate page and put the total below.	urity Act; payments received a national or domestic vance paid by the United t-related injury or disability, or	s					
			\$		\$			
			\$		\$			
	Total amounts from separate pages, if any.		+ \$	0.00	+\$			
 11.	Calculate your total current monthly income. Add lines	2 through 10 for each						
	column. Then add the total for Column A to the total for C			643.46	+ \$ _		= \$_	643.46
								l current thly income
P	art 2: Determine Whether the Means Test Ap	plies to You						
12	Calculate your current monthly income for the year. F	-						
'2.				Con	y line 11	hara 📤 🗍	Ф.	C42.40
	, ,,	II		сор	y iiile i i i	liere 2	<u> </u>	643.46
	Multiply by 12 (the number of months in a year).					г	x 12	<u> </u>
	12b. The result is your annual income for this part of the	e form.				12b.	\$	7721.52
13.	Calculate the median family income that applies to yo	u. Follow these steps:						
	Fill in the state in which you live.	NJ						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size of	household				13.	\$_9	91716.00
	To find a list of applicable median income amounts, go on instructions for this form. This list may also be available at		he separate			L		

ebtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

14	How	do the	lines	compare	2ء

Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*. Go to Part 3 and fill out Form 122A–2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X Signature of Debtor 1

Signature of Debtor 2

Date $\frac{01/30/2023}{\text{MM} / \text{DD} / \text{YYYY}}$

Date MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A–2. If you checked line 14b, fill out Form 122A–2 and file it with this form.

ebtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
ebtor 2 Spouse, if filing)				
-	First Name	Middle Name	Last Name	
nited States E	Bankruptcy Court	for the: District of Nev	v Jersev	

Check if this is an amended filing

Official Form 122A—1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

Part 1:

Identify the Kind of Debts You Have

- 1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).
 - No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
 - Yes. Go to Part 2.

Part 2:

Determine Whether Military Service Provisions Apply to You

- 2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?
 - No. Go to line 3.
 - Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
 - No. Go to line 3.
 - Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- 3. Are you or have you been a Reservist or member of the National Guard?
 - No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on _____, which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on _____, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

Fill in this information to identify your case:									
Debtor 1	George-Anna		Kelly						
	First Name	Middle Name	Last Name						
Debtor 2 (Spouse, if filing))								
	First Name	Middle Name	Last Name						
United States	Bankruptcy Court for t	he: District of Nev	v Jersey						
Case number (If known)			_						

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

viiat is your curr	ent marital s	tatus?				
Married						
Not married						
	years, have y	you lived anywh	ere other than where y	ou live now?		
No						
Yes. List all of	the places yo	ou lived in the las	t 3 years. Do not include	where you live now.		
Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
-			From			From
Number Stre	et		То	Number Street		To
City	State	ZIP Code		City	State ZIP Code	_
				Same as Debtor 1		Same as Debtor 1
			From			From
Number Stree	et		То	Number Street		To
City	State	ZIP Code		City	State ZIP Code	_

Debtor 1	George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1:		Debtor 2:		
	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating Business	\$0.00	Wages, commissions, bonuses, tips Operating Business	\$	
For last calendar year: (January 1 to December 31, 2022 YYYYY	Wages, commissions, bonuses, tips Operating Business	\$19139.88	Wages, commissions, bonuses, tips Operating Business	\$	
For last calendar year before that: (January 1 to December 31, 2021 / YYYY	Wages, commissions, bonuses, tips Operating Business	\$	Wages, commissions, bonuses, tips Operating Business	\$	

5. Did you receive any other income during this year or the two previous calendar years?
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Temp. Disability	\$\$ \$		\$\$ \$
		\$		\$
For last calendar year:	Temp. Disability	\$ 7456.00		\$
(January 1 to December 31, 2022)		\$		\$
YYYY		\$		\$
For the calendar year before that:		\$		\$
(January 1 to December 31, 2021)		\$		\$
YYYY		\$		\$

Debtor 1	George-A	Anna		Kelly			Case number (if kr	nown)
	First Name)	Middle Name	Last Name				
Part 3	B: List	Certain	Payments You N	Made Before	You Filed for E	Bankruptcy		
6. Are	either Del	btor 1's c	r Debtor 2's debts	primarily cons	sumer debts?			
	No. Neit	her Debt	or 1 nor Debtor 2 h	as primarily co	onsumer debts.	Consumer debts are def	fined in 11 U.S.C. § 101	(8) as
		,	n individual primaril	'			75* or more?	
				ed for bankrupto	y, did you pay ang	y creditor a total of \$7,5	75 of more?	
		No. Go						
		tota	ıl amount you paid tl	hat creditor. Do	not include paym	675* or more in one or ments for domestic supposes to an attorney for this	ort obligations, such as	
	* Su	bject to a	djustment on 4/01/2	5 and every 3 y	ears after that for	cases filed on or after t	he date of adjustment.	
	Yes. Deb	tor 1 or F	Debtor 2 or both ha	ve primarily co	onsumer dehts			
						y creditor a total of \$600) or more?	
		No. Go	to line 7.					
		cre	ditor. Do not include	payments for c	lomestic support o	0 or more and the total a obligations, such as child r this bankruptcy case.	amount you paid that d support and	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
					payment			
						\$	\$	Mortgage
		Creditor's	Name					Car
								Credit Card
		Number	Street					Loan Repayment
								Suppliers or vendors
								Other
								Other
		City	State	ZIP Code				
Insi corp age	ders includ	e your rel f which yo g one for	atives; any general ou are an officer, dire a business you ope	partners; relativector, person in	es of any general control, or owner	on a debt you owed ar partners; partnerships of of 20% or more of their C. § 101. Include paymo	of which you are a gene voting securities; and a	eral partner; any managing
	Yes. List a	all payme	nts to an insider.					
					Dates of	Total amount	Amount you still owe	Reason for this payment
					payment	paid	Amount you still owe	neason for this payment
						\$	\$	
	Insider's N	ame						
	Number	Street						
	City		State	ZIP Code				

Debtor 1	George-Anna		Kelly	Case number (if known)
	First Name	Middle Name	Last Name	

ithin 1 year before you filed for bankru insider? clude payments on debts guaranteed or c			ts or transfer any pro	perty on account of a	debt that benefited
No.					
Yes. List all payments that benefited ar	n insider				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name Number Street			\$	\$	
City State	ZIP Code				

Case title Atlantic City Electric v.	Nature of the					
Yes. Fill in the details. Case title Atlantic City Electric v.	Nature of the					
Case title Atlantic City Electric v.	Nature of the					
	Nature of the					
		case	Court or agency			Status of the cas
	Civil		Cumberland Coun	ity Court		Pending
Georgeann Kelly	_		Court Name	,		— On appeal
			60 W Broad St.			Concluded
Case number DC2649-22			Number Street			_
	_					_
			Bridgeton	NJ	08302	
			City	State	ZIP Code	_
No. Go to line 11. Yes. Fill in the information below.	elow.	of your property re	possessed, foreclosed	d, garnis	hed, attached	
				d, garnis		Value of the prop
				d, garnis		
Yes. Fill in the information below.				d, garnis		Value of the prop
Yes. Fill in the information below.		Describe the property Explain what happene	od	d, garnis		Value of the prop
Yes. Fill in the information below. Creditor's Name		Describe the property	ed possessed.	d, garnis		Value of the prop
Yes. Fill in the information below. Creditor's Name		Describe the property Explain what happene Property was rep	oossessed. eclosed.	d, garnis		Value of the prop

Debtor 1 George-Anna

First Name

Kelly

Last Name

Middle Name

12. V	/ithin 1 year before you filed for bankruptcy, w reditors, a court-appointed receiver, a custodi	ras any of your property in the possession of an assigneran, or another official?	ee for the benefit	of
	No			
	Yes			
Part	: 5: List Certain Gifts and Contributio	ns		
13. \	Nithin 2 years before you filed for bankruptcy,	did you give any gifts with a total value of more than \$6	00 per person?	
	No			
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	P5. P5.55.		9	
	Person to Whom You Gave the Gift	-		\$
	r erson to whom rou dave the dift			
	Number Street	-		
		-		
	City State ZIP Code	-		
	Person's relationship to you			
	. ,			
14. \	Nithin 2 years before you filed for bankruptcy,	did you give any gifts or contributions with a total value	e of more than \$6	600 to any charity?
	No			
	Yes. Fill in the details for each gift or contribut	ion.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
				\$
	Charity's Name			
	Number Street	_		
	Number Street			
		-		
	Oite. Otata 7ID Oada	-		
	City State ZIP Code			
Part	6: List Certain Losses			
ган	List Gertain Losses			
15. V	/ithin 1 year before you filed for bankruptcy or isaster, or gambling?	since you filed for bankruptcy, did you lose anything b	ecause of theft, f	ire, other
	No			
	Yes. Fill in the details.			

Debtor 1 George-Anna

First Name

Kelly

Last Name

Middle Name

Case number (if known)

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
			\$
rt 7: List Certain Payments or Trans	sfers		
Within 1 year before you filed for bankruptcy you consulted about seeking bankruptcy or	/, did you or anyone else acting on your behalf pay or tran		to anyone
No			
Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or transfer was made	Amount of payme
Person Who Was Paid			\$
Number Street			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			
Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you	y, did you or anyone else acting on your behalf pay or trans or to make payments to your creditors?	sfer any property	to anyone who
No			
Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or transfer was made	Amount of payme
Danca Wha Was Daid			\$
Person Who Was Paid			
Number Street			
City State ZIP Code			
		l	

Debtor 1 George-Anna

First Name

Kelly

Last Name

Middle Name

Case number (if known)

t	Vithin 2 years before you filed for bankruptcy, ransferred in the ordinary course of your busi	ness or financial affairs?			
	nclude both outright transfers and transfers made to not include gifts and transfers that you have all		f a security interest of	or mortgage on your pro	operty).
	No	,			
	Yes. Fill in the details.				
		Book district to the state of t	D		D. 1. 1
		Description and value of property transferred		roperty or payments ots paid in exchange	Date transfe was made
	Person Who Received Transfer	-			
	Number Street	_			
		_			
	City State ZIP Code	-			
	Person's relationship to you				
	No Yes. Fill in the details.				
		Description and value of the prop	erty transferred		Date transfe was made
		Description and value of the prop	erty transferred		
	Yes. Fill in the details.	-		ge Units	
V	Yes. Fill in the details. Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, valued, sold, moved, or transferred? Include checking, savings, money market, or o	Instruments, Safe Deposit B	oxes, and Storag struments held in y tes of deposit; shar	our name, or for you	was made
V	Yes. Fill in the details. Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, volumed, or transferred?	Instruments, Safe Deposit B	oxes, and Storag struments held in y tes of deposit; shar	our name, or for you	was made
V	Yes. Fill in the details. Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, valued, sold, moved, or transferred? Include checking, savings, money market, or o	Instruments, Safe Deposit B	oxes, and Storag struments held in y tes of deposit; shar	our name, or for you	was made
V	Yes. Fill in the details. Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, vilosed, sold, moved, or transferred? Include checking, savings, money market, or or orokerage houses, pension funds, cooperative	Instruments, Safe Deposit B	oxes, and Storag struments held in y tes of deposit; shar	our name, or for you	was made
V	Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, vilosed, sold, moved, or transferred? Include checking, savings, money market, or or rokerage houses, pension funds, cooperative.	Instruments, Safe Deposit B	oxes, and Storag struments held in y tes of deposit; shar	our name, or for your	r benefit, nions,
V	Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, vilosed, sold, moved, or transferred? Include checking, savings, money market, or or rokerage houses, pension funds, cooperative.	Instruments, Safe Deposit B were any financial accounts or insther financial accounts; certificats, associations, and other finance Last 4 digits of account number	oxes, and Storagestruments held in yetes of deposit; sharial institutions. Type of account or instrument	our name, or for your es in banks, credit ur Date account was closed, sold, moved,	r benefit, nions, Last balance before closing or transfer
V	Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, vilosed, sold, moved, or transferred? Include checking, savings, money market, or or rokerage houses, pension funds, cooperative.	Instruments, Safe Deposit B were any financial accounts or insther financial accounts; certificates, associations, and other financial	oxes, and Storag struments held in y tes of deposit; shar ial institutions.	our name, or for your es in banks, credit ur Date account was closed, sold, moved,	was made r benefit, nions,
V	Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, viclude checking, savings, money market, or orokerage houses, pension funds, cooperative No Yes. Fill in the details.	Instruments, Safe Deposit B were any financial accounts or insther financial accounts; certificats, associations, and other finance Last 4 digits of account number	oxes, and Storagestruments held in yetes of deposit; sharial institutions. Type of account or instrument	our name, or for your es in banks, credit ur Date account was closed, sold, moved,	was made r benefit, nions, Last balance before closing or transfer
V	Name of trust List Certain Financial Accounts, Vithin 1 year before you filed for bankruptcy, viclude checking, savings, money market, or orokerage houses, pension funds, cooperative No Yes. Fill in the details.	Instruments, Safe Deposit B were any financial accounts or insther financial accounts; certificats, associations, and other finance Last 4 digits of account number	oxes, and Storagestruments held in yetes of deposit; sharial institutions. Type of account or instrument Checking Savings	our name, or for your es in banks, credit ur Date account was closed, sold, moved,	r benefit, nions, Last balance befor

Kelly

Last Name

Middle Name

Debtor 1 George-Anna

First Name

Case number (if known)

City	State ZIP Code	_		
you now have, curities, cash, o	or did you have within 1 year	ar before you filed for bankruptcy, any safe	e deposit box or other depositor	ry for
No				
Yes. Fill in the	details.			
		Who else had access to it?	Describe the contents	Do you s have it?
Name of Finance	ial Institution	Name		No Ye:
Number Stree	et	Number Street		
City ave you stored p	State ZIP Code	City State ZIP Code place other than your home within 1 year k	before you filed for bankruptcy	?
ave you stored p	property in a storage unit or		pefore you filed for bankruptcy	?
ave you stored p	property in a storage unit or		Describe the contents	
ave you stored p No Yes. Fill in the	oroperty in a storage unit or details.	place other than your home within 1 year by the second within 1 year by the within 1 year by		Do you s have it?
ave you stored p	oroperty in a storage unit or details.	place other than your home within 1 year b		Do you s have it?
ave you stored p No Yes. Fill in the	oroperty in a storage unit or details.	place other than your home within 1 year by the second within 1 year by the within 1 year by		Do you s have it?
No Yes. Fill in the	oroperty in a storage unit or details.	place other than your home within 1 year be written when the within 1 year be written within 1 y		Do you s have it?
No Yes. Fill in the Name of Storage Number Stree	coroperty in a storage unit or details. e Facility State ZIP Code	place other than your home within 1 year k Who else has or had access to it? Name Number Street City State ZIP Code		Do you s have it?
No Yes. Fill in the Name of Storage Number Stree City 9: Identify	oroperty in a storage unit or details. e Facility State ZIP Code Property You Hold or Co	Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you s have it? No Yes
No Yes. Fill in the Name of Storage Number Stree City 9: Identify	oroperty in a storage unit or details. e Facility State ZIP Code Property You Hold or Countrol any property that some	place other than your home within 1 year k Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you s have it? No Yes
No Yes. Fill in the Name of Storage Number Stree City 9: Identify	oroperty in a storage unit or details. e Facility State ZIP Code Property You Hold or Countrol any property that some	Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you s have it? No Yes
No Yes. Fill in the Name of Storage Number Stree City 9: Identify	oroperty in a storage unit or details. e Facility State ZIP Code Property You Hold or Control any property that some someone.	Who else has or had access to it? Name Number Street City State ZIP Code	Describe the contents	Do you s have it? No Yes

Kelly

Last Name

Middle Name

Debtor 1 George-Anna

First Name

First Nar	me	Middle Name		Name								
				_							\$	
Owner's	Name											
Number	Street			Number	Street							
				-								
City		State ZI	P Code	City		State	ZIP Code					
rt 10: Giv	ve Details	About Envir	onmental	Informat	ion							
	o Botano	7.00 Gt 2										
. 41	f Dt 40	o the fellender										
the purpose	e of Part 10	0, the following	definition	s apply:								
Environment	<i>al law</i> mear	ns any federal,	state, or lo	cal statute	or regulation	n conce	rning po	llution,	contaminati	ion, releases	of	
hazardous o	or toxic sub	stances, wast	es, or mate	erial into the	e air, land, s	oil, surfa	ace water	r, grour	dwater, or o			
including sta	atutes or re	egulations con	trolling the	cleanup o	f these subs	stances,	wastes, o	or mate	rial.			
Site means a	anv locatio	n, facility, or p	roperty as	defined un	der anv envi	ironment	tal law. w	vhether	vou now ow	n. operate. o	or	
		n, operate, or ι					,		,	, оролицо, ч		
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substance, r	nazardous	material, pollu	tant, conta	minant, or	Similar term	l .						
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Kelly

Debtor 1 George-Anna

	First Name Ivilidale Name Last r	varne			
26 Ha y	ve you been a party in any judicial or adminis	strativo procoodina undor any o	nvironmontal la	u2 Include settlements and	ordore
20. Па		strative proceeding under any er	iiviioiiiileiitai iav	vi include settlements and	orders.
	No				
	Yes. Fill in the details.				
		Court or agency	Nature of	the case	Status of the
					case
	Case title				Pending
		Court Name			On appeal
	Case number				Concluded
		Number Street			
		City State ZIP Code	-		
Part 1	1: Give Details About Your Business	or Connections to Any Busi	ness		
27. Wit l	hin 4 years before you filed for bankruptcy, c	lid vou own a business or have a	anv of the follow	ring connections to any bus	siness?
	A sole proprietor or self-employed in a	-	-	_	
		-	-	nie or part-time	
	A member of a limited liability company	(LLC) or limited liability partne	ersnip (LLP)		
	A partner in a partnership				
	An officer, director, or managing execu	-			
	An owner of at least 5% of the voting or	equity securities of a corporati	ion		
	No. None of the above applies. Go to Part 1	2.			
	Yes. Check all that apply above and fill in the		nee		
	res. Once an that apply above and his in the	ic details below for each busine	.33.		
		Describe the nature of the busines	ss	Employer Identification num Do not include Social Securi	
				Do not include Social Securi	ty number of fritt.
	During and Name			EIN:	
	Business Name				
	Number Street				
	Number Street	Name of accountant or bookkeepe	er	Dates business existed	
				F T.	
				From To	
	City State ZIP Code				
	hin 2 years before you filed for bankruptcy, c itutions, creditors, or other parties.	lid you give a financial statemen	t to anyone abo	ut your business? Include a	all financial
IIISI	•				
	No				
	Yes. Fill in the details below.				
		Date issued			
	Mana	MM / DD / VOOO			
	Name	MM / DD / YYYY			
	Niverban Charat				
	Number Street				

Debtor 1 George-Anna

Kelly

First Name Middle Name Last Name City State ZIP Code The Proof of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fra in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	r 1	George-Anna			Kelly				Ouse ne	ımber (<i>if kn</i>	OWII)	
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by frain connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.	•	First Name	Middle Name)	Last Name							
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Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
-	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: District of Nev	v Jersey	

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.			
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
	Creditor's Wells Fargo Auto name:	Surrender the property. Retain the property and redeem it.	No Yes	
	Description of 2013 Honda Civic - 87,000 miles property	Retain the property and enter into a Reaffirmation Agreement.		
	securing debt:	Retain the property and [explain]:		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

No
Yes

Debtor 1	tor 1 George-Anna		Kelly	Case number (if known)	
	First Name	Middle Name	Last Name		

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X	X
Signature of Debtor 1	Signature of Debtor 2
Date 01/30/2023	Date
MM / DD / YYYY	MM / DD / YYYY

Debtor 1	George-Anna		Kelly	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing))			
	First Name	Middle Name	Last Name	

Mailing List

List contains the name and address of each entity included on Schedules D, E/F, G, H and Creditor Information.

Wells Fargo Auto		
PO Box 17900		
Denver	СО	80217-0900
State of NJ - Unemployment		
PO Box 058		
Trenton	NJ	08625
Atlantic City Electric		
PO Box 597		
Mays Landing	NJ	08330
Youngblood Franklin & Sampolo, P.A.		
1201 New Road , Suite 230		
Linwood	NJ	08221
Cumberland Green Apartments		
27 N Ladow Avenue		
Millville	NJ	08332
Benjamin Galle		
25 S. Ladow Avenue		
Apt 4-k		
Millville	NJ	08332
111111111111111111111111111111111111111	140	3300 <u>2</u>